

DMA ADMINISTRATIVE LETTER NO: 06-18, ADDENDUM 1, MEDICAID PROCEDURES FOR HURRICANE FLORENCE

DATE: October 25, 2018

SUBJECT: Medicaid/NCHC Procedures Due to Hurricane Florence

DISTRIBUTION: County Directors of Social Services
Medicaid Supervisors
Medicaid Eligibility Staff

I. PURPOSE

A. The purpose of this letter is to provide:

1. Additional guidance and clarification provided to policy in [DMA Administrative Letter 06-18](#).
2. These policies no longer apply statewide effective November 1, 2018 and will be limited to those designated disaster counties listed below or any additional counties designated as IA (Individual Assistance) related to Hurricane Florence. This also includes individuals who are displaced from the designated counties and who may apply in another county in North Carolina.

Anson	Beaufort	Bladen	Brunswick
Carteret	Chatham	Columbus	Craven
Cumberland	Durham	Duplin	Greene
Guilford	Harnett	Hoke	Hyde
Johnston	Jones	Lee	Lenoir
Moore	New Hanover	Onslow	Orange
Pamlico	Pender	Pitt	Richmond
Robeson	Sampson	Scotland	Union
Wayne	Wilson		

All local agencies must take and process Medicaid/North Carolina Health Choice (NCHC) applications and/or provide case maintenance for individuals impacted/displaced from the above listed counties.

II. POLICY PROCEDURES

Self-attestation may be allowed as verification for eligibility determinations as a result of Hurricane Florence.

The caseworker must obtain a complete self-attestation that includes the same information that would be verified such as, having a checking account and an account number. The self-attestation should include what the balance was as of the first moment of the month.

Document the reason self-attestation was accepted as "Hurricane Florence, see [DMA Administrative Letter 06-18](#)."

A. Income:

1. If electronic sources are available check all online resources as required by policy.
2. If electronic sources are not available, then accept self-attestation.

Example: If the caseworker has an application where the applicant's self-attestation is below the income limits and electronic verification is above, IEM 15042, Reasonable Compatibility, states that a reasonable explanation or verification is required.

Caseworkers should attempt to contact the applicant/beneficiary via telephone to obtain the self-attestation or reasonable explanation. However, if the caseworker is unable to obtain the self-attestation from the applicant, the caseworker must request and wait for verification.

3. Reasonable Compatibility:

Follow the Reasonable Compatibility chart located in IEM 15042, and accept the applicant's statement. Document the case in detail noting what the applicant provided for self-attestation.

Example: If the applicant states income of \$1000 per month, whether ongoing or retroactive, the statement must include the hourly pay rate, weekly amount, etc. Document the case in detail noting the reason for taking the applicant's statement, if verification is not available.

B. Resources:

1. If electronic sources are available, those should be utilized first. If AVS does not return an immediate result, accept the applicant/beneficiary's self-attestation, as long as the statement is under the resources limit. The caseworker should set task to review the case within thirty (30) days.

Example: The caseworker must obtain a complete self-attestation that includes the same information that would be verified such as, having a checking account and an account number. The self-attestation should include what the balance was as the first moment of the month.

2. Self-attestation of resources will be accepted as long as the applicant/beneficiary is under the resource limit.
3. If the applicant/beneficiary does not know their account number and does not have access to obtain their account number due to Hurricane Florence, the caseworker can accept their self-attestation and document the case regarding why the applicant/beneficiary cannot obtain and provide their account number.

C. State Residence

1. Follow state residency policy regarding individuals who attest to state residency but cannot provide verification. They are allowed to sign the DMA-5153, North Carolina Residency Applicant Declaration.
2. Individuals who are temporarily absent from North Carolina continue to meet state residence requirements, unless another state has determined the individual is a resident of that state.
3. Consider applicant/beneficiaries who have evacuated from the state as a result of Hurricane Florence temporarily absents when evaluating state residency.

D. Self-attestation is not allowed for:

1. Medical bills to meet a deductible must be verified for Medically Needy.
2. Reserve reduction
3. Transfer of assets
4. Citizenship and Immigration Status

Follow policy located in 15100, Alien Requirements and MA-2506, US Citizenship Requirements. Remember to apply the 90-day Reasonable Opportunity Period, if applicable, as instructed in [DMA Administrative Letter 06-13](#).

E. 60/90-day Hearing Timeframe

Individuals have 60 days from the date of the notice to request a hearing for changes in eligibility. That period is extended to 90 days for good cause. Hurricane Florence will be considered a good cause reason for allowing 90 days to request a hearing for request on or before November 30, 2018.

F. Premiums

Individuals who are required to pay an enrollment fee for NC Health Choice or Health Care for Workers with Disabilities (HCWD) or a premium for HCWD will be exempt until further notification. Document in NCFAST the reason as "Hurricane Florence, see [DMA Administrative Letter 06-18](#)."

G. NEMT (Non-Emergency Medical Transportation)

As a result of Hurricane Florence, the county may have to make alternate arrangements to provide transportation to Medicaid covered services. In some instances:

1. Transportation may be required to a provider at a significantly greater distance.
 - a. The DMA-5048 is not required in these situations until further notice.
 - b. Document the NEMT log/record noting Hurricane Florence as the reason.
2. The county may use a vendor or provider who is not under contract.
 - a. If you must use a transportation vendor who is not under contract in order to provide the required transportation during this time, document the NEMT log/record.
 - b. Further instructions will be provided for coding to request reimbursement. This reimbursement request will be submitted to NC Medicaid.

IV. IMPLEMENTATION

This policy applies to applications and reviews pending or taken on or after September 13, 2018. This addendum applies only to the designated counties listed above.

Refer to the NC FAST level of October 24, 2018, for guidance on acceptable verification requirements for those procedures.

If you have any questions regarding information in this letter, please contact your Operational Support Team.

A handwritten signature in blue ink, appearing to read "D. Richard", is positioned above the printed name and title.

Dave Richard
Deputy Secretary, NC Medicaid